PTO/SB/64 (10-05) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TION FOR REVIVAL OF AN APPLICATION FOR PATENT ABANDONED UNINTENTIONALLY UNDER 37 CFR 1.137(b)

Docket Number (Optional)

7.27.11.20.11.22.01.11.11.11.11.11.11.11.11.11.11.11.11.	2.(0) 0//(1.10/(5)	
First named inventor: Nagle, James L		RECEIVE
Application No.: 10/750,616	Art Unit: 3714	DEC
Filed: December 31, 2003	Examiner: Ricci, John A	1 5 20ns
Title: Arrow Rest		303
	•	

Attention: Office of Petitions Mail Stop Petition

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

FAX (571) 273-8300

12/15/2005 DTESSEM1 00000031 502525 10750616

01 FC:2453

750.00 DA

NOTE: If information or assistance is needed in completing this form, please contact Petitions Information at (571) 272-3282.

The above-identified application became abandoned for failure to file a timely and proper reply to a notice or action by the United States Patent and Trademark Office. The date of abandonment is the day after the expiration date of the period set for reply in the office notice or action plus an extensions of time actually obtained.

APPLICANT HEREBY PETITIONS FOR REVIVAL OF THIS APPLICATION

NOTE: A grantable petition requires the following items:

- (1) Petition fee;
- (2) Reply and/or issue fee;
- (3) Terminal disclaimer with disclaimer fee required for all utility and plant applications filed before June 8, 1995; and for all design applications; and
- (4) Statement that the entire delay was unintentional.

	ee ill entity-fee \$ <u>750.00</u> (37 CFR 1.17(m)). <i>I</i> er than small entity – fee \$(3		entity status. See 37 CFR 1.27.
2. Reply and A.	The reply and/or fee to the above-noted Of the form of Response to Final Office Action has been filed previously on is enclosed herewith.		(identify type of reply):
В.	The issue fee and publication fee (if applic has been paid previously on is enclosed herewith.	able) of \$	

This collection of information is required by 37 CFR 1.137(b). The information is required to obtain or retain a benefit by the public which is to file (and by the This collection of information is required by 37 CFR 1.137(b). The information is required to obtain or retain a beneal by the public whach is to take 1.0 hour to USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

[Page 1 of 2]

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

When the is a second

REQUEST FOR PATENT FEE REFUND						
1 Date of Request: 1/10/06 2 Serial/Patent # 10/750, 6/6						
3 Ple	ease refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
	Filing				\$	
Amendment		Î			\$	
Extension of Time		Î			\$	
	Notice of Appeal/Appeal				\$	
X	Petition			11/21/05	\$ 750	
	Issue				\$	
	Cert of Correction/Terminal Disc	:.			\$	
	Maintenance				\$	
	Assignment				\$	
	Other				\$	
			7 TOTAL OF RE		\$	
			8 TO BE	REFUNDED B	BY:	
10 REASON:			Treasury Check			
	Overpayment		Credit Deposit A/C #:			
X	Duplicate Payment		9	50 2	525	
	No Fee Due (Explanation):					
11 REFUND REQUESTED BY:						
TYPED/PRINTED NAME: David Buci TITLE: Petitions Exemine						
SIGNATURE:						
OFFICE:						
THIS SPACE RESERVED FOR FINANCE USE ONLY:						
APPROVED: DATE:						

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B